

VERMONT TOBACCO EVALUATION & REVIEW BOARD

Minutes of the Board Meeting

December 12, 2007

Approved January 10, 2008

Members Present: Theodore Marcy, MD, Chair, Brian Flynn, ScD., Vice Chair, Edna Fairbanks Williams, Rep. Patsy French, Amy Brewer, Erica Peters and Ryan Krushenick

Designees Present: Sheri Lynn for Acting Commissioner Moffatt, Marcia Lawrence for Commissioner Hogan, Kate O'Neill for Commissioner Cate, Christy Taylor Mihaly for Attorney General Sorrell

Guests: Catherine Suiter, FAHC, Todd Hill, Department of Health, David Cranmer, Coalition for a Tobacco Free Vermont, Kelly Stoddard, American Cancer Society

CALL TO ORDER: Dr. Marcy opened the meeting at 3:38 p.m.	
PUBLIC COMMENT: There was no public comment. Ms. Lawrence, following up with last month's discussion regarding youth access enforcement and the Synar Report, distributed retailer penalties for alcohol and tobacco compliance check violations. She said tobacco compliance rates are better than the alcohol compliance rates. She does not believe there is a federal statute related to alcohol compliance. This chart shows retailer penalties but the clerk that makes the sale is also fined \$100 for the first offense (similar to a traffic citation). Ms. Mihaly said there is a separate requirement that the clerk selling tobacco has been trained and a separate penalty assessed if the clerk, even if he/she doesn't sell, cannot show proof of training. Commissioner Hogan hears the tobacco violations. Dr. Marcy said there has been discussion about using penalties to improve adherence. Dr. Marcy asked how often retailers actually have been fined. Ms. Mihaly said the Department of Liquor Control keeps records of the offenses and the penalties applied; they have not been analyzed. Dr. Flynn said it would be good for a consultant to look at data sometime. Ms. Lawrence will provide a summary of violations and fines assessed in the past few years to the Enforcement Committee. Ms. Lynn asked if we know if penalties are effective method for gaining compliance. Ms. Ryan said RTI recommended increasing penalties (first violation in Vermont is currently a warning) in its 2006 report as the best and most cost-effective option. Rep. French said it would be interesting to know if there are repeat offenders.	<ul style="list-style-type: none">• Compliance Check Violations & Retailer Fines
REPORT FROM THE CHAIR: Dr. Marcy said he, Ms. Lynn and Ms. Ryan met with the Secretary of the Agency of Human Services, Cindy LaWare, Deputy Secretary Patrick Flood, Joshua Slen, Director of Office of Vermont Health Access (OVHA), Erin Cody, OVHA's Medical Director and Sharon Moffatt, Acting Commissioner of Health today. He presented the case that we are interested in reducing health care costs and tobacco control is a very potent way to accomplish that. The American Legacy Foundation recently commissioned a report, prepared by RTI, Vermont's independent program evaluator, that used national Medicaid data to calculate the savings to the program if the relative percentage of adult smokers declined. If the number of	<ul style="list-style-type: none">• Meeting with Office of Health Access (OVHA)• 2008 board meeting schedule

<p>smokers in Vermont decreased by 4400 (5%) people, the state would experience a million dollar savings each year in Medicaid expenses for five years. Projected savings increase with an increase in the number of smokers quitting. Since 2001, we have experienced a 15% reduction in the adult smoking prevalence. If the analysis is correct, that reduction means we are spending \$4-5 million less per year in Medicaid expenses. We put this forward hoping to gain allies who will support improvements to the program. We also hope for improved coordination with OVHA to make it possible for Medicaid clients who enroll in counseling to receive nicotine replacement therapy without a prescription and \$2 co-pay. In return OVHA would reimburse the Department of Health (VDH) for costs (which would be less expensive than the current system). Healthcare providers are an important connection and VDH and OVHA all need to work with providers to increase the number of smokers to resources. This can be accomplished through the Blueprint for Health.</p> <p>Dr. Marcy pointed to the 2008 board meeting schedule in board packets and asked members to schedule in their calendars. He reminded everyone that the April meeting is longer (three hours) to make community coalition grantee recommendations.</p>	
<p>REVIEW OF MINUTES: The board approved the minutes of the November 14, 2007 board meeting.</p>	<ul style="list-style-type: none"> • Minutes approved
<p>REPORT: CESSATION COMMITTEE: Ms. Ryan said last April the Cessation Committee asked that a scientific advisory panel review the coordination of the state's cessation services. There has been an increase over time of the use of phone counseling only by hospital counselors. The board and VDH have been concerned about duplication in services. This panel met on December 4 and members included Charles MacLean, MD, an internist, Laura Solomon, PhD, a member of the cessation committee and Karen Lafayette, legislative council for Vermont Low Income Advocacy Council (VLIAC). Donna Warner, MA tobacco control program and Barbara Perry, from Maine's Center for Tobacco Independence, called in due to the weather. Dr. Marcy participated as an observer. Michael Zvolensky, PhD, a researcher at UVM, was a member but did not participate due to illness. Ms. Lynn will distribute the minutes at the end of December and a synopsis of the panel's recommendations in mid-January. The panel will review and comment by email. The panel will not meet in person again as it came to consensus on major recommendations. The cessation will meet in February to review the panel's recommendations. VDH will review all and make a final recommendation in July to coordinate services for Vermont smokers in a cost-effective manner. Dr. Marcy thought the meeting was very good. In addition to task at hand, it educated people in the state working in healthcare, created potential future partners and increased collaboration with other states.</p>	<ul style="list-style-type: none"> • Scientific Advisory Panel: Cessation Services
<p>REPORT: EVALUATION COMMITTEE: Dr. Marcy planned to highlight the RTI annual program report but Ms. Ryan just received the electronic version yesterday. He will review at a future meeting.</p>	<ul style="list-style-type: none"> • RTI Annual Report

<p>The state contracts with an independent program evaluator (currently RTI). The current contract ends on June 30, 2008. A new bid must be posted. The evaluation committee met last week to iron out the work specifications for the request for proposals (RFP). The board will vote on the committee recommendations in January. Dr. Marcy said the evaluation process is evolving. For example, the evaluation of all cessation services will be combined in one report next year. This is a positive move as these services are complimentary, not parallel. Ms. Lawrence asked how many organizations might bid on this contract. For the first contract bid, the state received three proposals and the last one, only two.</p>	<ul style="list-style-type: none"> • Evaluation Work Specifications
<p>PUBLIC POLICY RECOMMENDATIONS: Dr. Marcy said last month the board voted on a number of policy recommendations but held off on the discussion/vote on the Tobacco Trust Fund. Ms. Ryan said in the past the board has recommended that the legislature appropriate money to the Tobacco Trust Fund. No money has been allocated to the fund since 2001; it has only accrued interest. This fund was created, at the recommendation of the 1999 Tobacco Task Force, as a sustainable source of future funding for tobacco control as the master settlement payments decrease over time. The task force recommended that one-third of the master settlement funding be allocated to the trust fund (in addition to one-third to the program and one-third to other health-related programs). Ms. Lynn wondered if voting on this item might be a conflict of interest for her as the designee for VDH. Ms. Mihaly did not think so; it is not currently a VDH budget item. She did not think this should preclude Ms. Lynn from voting. This is a policy recommendation now, focused on good long-term planning. There was discussion about specifics: do we mean annual payments or only for the next fiscal year? Should we identify the strategic contribution fund as the source? Rep. French said it might be good to designate the specific source (though she is not hopeful in another difficult budget year). However, the specific recommendation might hinder other options. Rep. French said making recommendations for other than this fiscal year is probably meaningless. The legislature appropriates one year at a time.</p> <p>Motion: the board recommends an appropriation to the Tobacco Trust Fund in FY2009. Seconded. Motion passed.</p> <p>Ms. Mihaly said the board discussed the ban on the internet sale of tobacco products last month and the board recommended it. Ms. Ryan forgot to include in the list of recommendations approved last month and will add it.</p>	<ul style="list-style-type: none"> • Public Policy Recommendations • VOTE
<p>EXECUTIVE SUMMARY, 2008 BOARD REPORT: The board is charged with providing an annual report to the Governor and General Assembly. The RTI annual report is the basis for the board report. Dr. Marcy said that many stakeholders read this report but legislators are likely only to read the Executive Summary. Ms. Ryan provided the latest version and Dr. Marcy asked members to review it before</p>	<ul style="list-style-type: none"> • Executive Summary Review

discussion. The Evaluation Committee weighed in last week. Ms. O'Neill asked why there are two boxes (budget and additional recommendations). Ms. Ryan said it was originally all on page two but the Evaluation Committee suggested separating to show the priorities (adult cessation) on page one. Ms. O'Neill said it led her to wonder if the recommended activities listed on page one highlight the need for the \$3.2 million increase and the activities bulleted on page two were a continuation of funds. Ms. Ryan said everything on page one and two are part of the \$3.2 million recommended increase. Dr. Flynn said he had a similar reaction to the two boxes. He suggested putting the specifics (bullets) on page two, the dollar figure on page one along with a general description. Rep. French suggested adding "Major Recommendations & Findings" back to page one as a headline again to draw attention. She said members will not receive a copy of this report unless they are on a relevant committee or request it from the clerk's office. She said that Ms. Ryan will likely talk to committees in person but it does help to have a summary that is self-explanatory for those that read it without the benefit of a presentation. Ms. O'Neill asked about the rationale to recommend licensing health educators. Ms. Ryan said this is the second year the community and school programs committee made this recommendation. It came as a result of concerns about the lack of fidelity and consistency in tobacco prevention program delivery. Ms. O'Neill is not sure if state appropriation and tobacco funding would change that. Ms. Ryan will talk to Ms. O'Neill more about the committee's decision.

Ms. Lynn said she thought one of the areas of concern (page two) is not mentioned: the majority of healthcare providers do not refer smoking patients to a specific program or service. Could this be added? They may be talking about smoking but do not take the next step. She said that it is not just the uninsured that is unsure if they are eligible for free NRT. Most Vermonters are not aware of this service. Dr. Marcy said the previous complexity of the NRT program was confusing. It has been simplified but many don't know it yet. Ms. Brewer agreed and said she often surprises people with the news. There was some discussion about replacing Ready, Set...STOP and Quit Line references with "network of cessation services or quit services" as we move toward a new branding. Since we do not have a new name yet, Ms. Ryan will use the current program names to reduce confusion. Ms. Ryan updated these bullets from last year but needs to look at RTI's annual report to revise both positive trends and areas of concerns. Ms. Ryan will be in touch with committee chairs and others in the process. The report is due January 15.

ADJOURN: The meeting was adjourned at 4:45 p.m.

Signed by:

Rebecca L. Ryan, MEd
Administrator

Approved by:

Theodore Marcy, M.D., MPH
Chair

